										'Pplication or Docket Number				
PATENT APPLICATION F DETERMINATION RECORD 10/069545 Effective October 1, 2001												45		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL E	MIIIN	OR		THAN ENTITY		
TOTAL CLAIMS						RAT		ATE:	FEE]	RATE	FEE		
FOR			NUMBER	FILEO	NUME	NUMBER EXTRA				OR	Basic Fee	890		
TOTAL CHARGEABLE CLAIMS			/ (cminus 20= *		•	/		\$ 9=		OR	X\$18=			
ſΝ	DEPENDENT C	LAIMS	2 minus 3 = *				X42=			OR	X84=			
M	ULTIPLE ÖEPE	NDENT CLAIM P	RESENT . [Y				140=		OR	+280=	280			
•!	f the difference	in column 1 is	ess than zero, enter "0" in column 2				TO	TAL	1-	OR	TOTAL	11970		
•	C		MENDED - PART II								OTHER			
_		(Column 1)		(Colum		(Column 3)	Şi	MALL	ENTITY	OR	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	. R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	-10	Minus '	* 9	<u>ن</u>		X	9=		OR	X\$18=	·		
	Independent	. 2	Minus	in A		8	×	12=		08	X84=			
3	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			40			+280=			
								40=.		OR	TOTAL	100 0		
								T. FEE		OR,	VDDIT, FEE	117000		
		(Column 1)		(Colum		(Column 3)					1	4000		
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	BER	PRESENT EXTRA	RV	ATE	ADDI- TIONAL FEE		PATE"	ADDI- TIONAL FEE		
	Total	.17	Minus	-20	9	•	×s	9=		OF	X\$18=			
	Independent	NTATION OF MU	Minus	** 2	2 4114	-	X	2=		QR	X84=			
	I I I I I I I I I I I I I I I I I I I	ITIATION OF MU	ALTIPLE DEF	ENDENT	·	سب	+14	(0≠		OF	42:0±	!		
٠	•		-	•			ADDI	OTAL FEE		OR A	TOTAL DOTT, FEE			
		(Column 1)		_(Cotum	nn 2)	(Column 3)								
AMENOMENT C		CLAIMS - REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	est IER USLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FET		RATE	ADDI- TIONAL		
	To rail		:/inus	*		2	XS	9=	i	OR	XS18=	į		
E E	Independent	•	Minus	***		•	X4			ľ	X84=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1. ^4	بـــــــــــــــــــــــــــــــــــــ		OR				
+140=										OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE OR ADDIT. FEE														
		mber Previously Pa iber Previously Paic							ropriate box					